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## \*\* CONTINUING DATA \*\*\*\*\*

*None*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/18/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 6
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## TITLE

Plasma treatment of contact lens and IOL

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